Six Sigma MEPRS Management Metrics



Click on a peer group below to view a specific metric:

Rz Dispensing Costs						
Medical Centers						
Large Hospitals						
Small Hospitals						
Large Clinics						
Small Clinics						
Large Hosp OCONUS						
Small Hosp OCONUS						
Clinics OCONUS						

Available FTE's per Daily Occupied Bed
Medical Centers
Large Hospitals
Small Hospitals
Large Hosp OCONUS
Small Hosp OCONUS

Personnel to Provider FTEs						
Medical Centers						
Large Hospitals						
Small Hospitals						
Large Clinics						
Small Clinics						
Large Hosp OCONUS						
Small Hosp OCONUS						
Clinics OCONUS						

Ratio of Support

Rz FTE					
Medical Centers					
Large Hospitals					
Small Hospitals					
Large Clinics					
Small Clinics					
Large Hosp OCONUS					
Small Hosp OCONUS					
Clinics OCONUS					

Rz Vorkload per

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NUS	j	Sma
JS		CI

Medical Centers					
Large Hospitals					
Small Hospitals					
Large Clinics					
Small Clinics					
Small Clinics Large Hosp OCONUS					
Large Hosp OCONUS					

Lab Workload per

Lab FTE

per Rad FTE	per R ∀ P
Landinal Contact	Madani Cartan
Medical Centers	Medical Centers
Large Hospitals	Large Hospitals
Small Hospitals	Small Hospitals
Large Clinics	Large Hosp OCONL
Small Clinics	Small Hosp OCONL
Large Hosp OCONUS	
Small Hosp OCONUS	
Clinics OCONUS	

Inpatient Costs

Rad Vorkload

Ambulatory
Costs per APG

Medical Centers

Large Hospitals

Small Hospitals

Large Clinics

Small Clinics

Large Hosp OCONUS

Small Hosp OCONUS

Clinics OCONUS

SRA International, Inc.
TMA MEPRS Program Office
Management Control and Financial Studies





By the end of this presentation, you will be able to:

- Describe the origin and goals of Six Sigma
- Identify how Six Sigma is used in healthcare and other industries
- Understand and correctly interpret the S2M3 tool
- Understand how individual MTF characteristics can affect its position among its peer group/cohort.
- Locate tools to help you begin exploring data quality opportunities





Six Sigma

- Six Sigma is a statistics based business improvement process that continually strives for perfection.
- It employs a disciplined methodology created from the manufacturing industry for eliminating the wastes of defects or variance to lower costs and improve customer satisfaction.

Six Sigma Methodology for Improving Existing Processes <u>DMAIC</u>

- **D**efine Opportunities
- Measure Performance
- Analyze Opportunity
- Improve Performance
- Control Performance





Six Sigma in Healthcare:

- Transcription businesses are able to identify the root cause responsible for the majority of errors committed by transcriptionists and thereby reducing significant numbers of errors.
- ➤ Gratiot Medical Center, in Michigan, was losing substantial revenue due to inconsistent registration and authorization procedures in the billing process. Almost immediately, they saw a significant drop-off in denials and they increased their revenue over \$100,000 in one year.
- West Branch Regional Medical Center in Michigan focused on a primary driver customer satisfaction: the Emergency Department. Elopement was reduced from 28 per month to 17 per month over a three-month period. The average stay for admits in the ED dropped from 2.6 hours to 1.6 hours. The additional capacity in ED has the potential to generate over \$150,000 in revenue per year.





Six Sigma MEPRS Management Metrics (S2M3)



FY06/FY07 Update All data obtained from the EAS IV Repository and M2 in September 2007



Click on a peer group below to view a specific metric:

Rx Dispensing Costs	Available FTE's per Daily Occupied Bed	Ratio of Support Personnel to Provider FTEs	Rx Workload per Rx FTE	Lab Workload per Lab FTE	Rad Workload per Rad FTE	Inpatient Costs per RWP	Ambulatory Costs per APG
Medical Center	Medical Center	Medical Center	Medical Center	Medical Center	Medical Center	Medical Center	Medical Center
Large Hospitals	Large Hospitals	Large Hospitals	Large Hospitals	Large Hospitals	Large Hospitals	Large Hospitals	Large Hospitals
Small Hospitals	Small Hospitals	Small Hospitals	Small Hospitals	Small Hospitals	Small Hospital:	Small Hospitals	Small Hospitals
Large Clinics	Large Hosp OCOI	Large Clinics	Large Clinics	Large Clinics	Large Clinics	Large Hosp OCOI	Large Clinics
Small Clinics	Small Hosp OCOI	Small Clinics	Small Clinics	Small Clinics	Small Clinics	Small Hosp OCO	Small Clinics
Large Hosp OCO		Large Hosp OCOI	Large Hosp OCOI	Large Hosp OCOI	Large Hosp OCOI		Large Hosp OCOI
Small Hosp OCO		Small Hosp OCO	Small Hosp OCO	Small Hosp OCO	Small Hosp OCO		Small Hosp OCO
Clinics OCONU		Clinics OCONU	Clinics OCONU	Clinics OCONU	Clinics OCONU		Clinics OCONU

Executive Summary:

Medical Centers Large Hospitals Large Hospitals OCONUS **Small Hospitals** Small Hospitals OCONUS Large Clinics Small Clinics Clinics OCONUS

Notes:

Six Sigma Description Definition of Metrics Data Sources Peer Group Definitions

External MEPRS Resources:

MEPRS Web Portal MEWACS MEPRS Manual DoD 6010.13-M Human System Interface (HSI)

MTF-Peer Group Lookup:

Air Force Army Navv

If you have questions on the data contained, please contact: Deirdre Baker SRA International 210-832-5216 Deirdre Baker@SRA.COM





Six Sigma MEPRS Management and Control Metrics

FY06/FY07 S2M3

Standardized Executive Summary by Peer Group*

DMIS ID	MTF Name	Rx Dispensing Costs	Available FTE per Daily Occupied Bed	Ratio of Support Personnel to Provider FTEs	Rx Workload per Rx FTE	Lab Workload per Lab FTE	Rad Workload per Rad FTE	Inpatient Costs per RWP	Ambulatory Costs per APG	Standardi zed Average
Medic	al Centers									
0109	BROOKE AMC-FT. SAM HOUSTON	0.03	0.36	0.14	2.95	1.44	1.72	0.25	0.17	0.88
0125	MADIGAN AMC-FT. LEWIS	-0.10	0.55	-0.23	-0.17	0.70	1.82	1.19	0.86	0.58
0108	WILLIAM BEAUMONT AMC-FT. BLISS	1.77	0.40	0.28	0.10	1.58	-0.51	0.58	-0.09	0.51
0052	TRIPLER AMC-FT SHAFTER	0.20	0.05	-0.40	0.12	1.06	1.44	0.15	1.25	0.48
0067	NNMC BETHESDA	0.71	1.19	1.14	1.05	-0.51	-0.18	-0.09	0.24	0.44
0124	NMC PORTSMOUTH	0.31	0.22	0.94	-0.39	-0.77	-0.62	0.60	0.98	0.16
0089	WOMACK AMC-FT. BRAGG	0.85	0.41	-2.73	0.17	0.60	-0.37	0.94	1.07	0.12
	NMC SAN DIEGO	-0.10	0.40	0.25	-0.41	-0.31	-0.53	0.86	0.36	0.07
0047	EISENHOWER AMC-FT. GORDON	0.01	0.59	-1.24	-0.71	-0.50	0.67	0.19	0.68	-0.04
0117	59th MED WING-LACKLAND	-0.24	0.09	0.77	0.15	-0.40	-0.21	-0.24	-0.88	-0.12
0037	WALTER REED AMC-WASHINGTON DC	-0.24	0.60	-0.33	-0.39	0.78	-0.34	-0.85	-0.38	-0.14
0095	74th MED GRP-WRIGHT-PATTERSON	0.76	-0.57	0.67	-0.64	-1.27	-0.72	0.01	-1.18	-0.37
0014	60th MED GRP-TRAVIS	-1.88	-1.70	0.34	-0.80	-1.31	-0.89	-0.80	-0.91	-0.99
0073	81st MED GRP-KEESLER	-2.07	-2.59	0.40	-1.04	-1.08	-1.29	-2.78	-2.18	-1.58

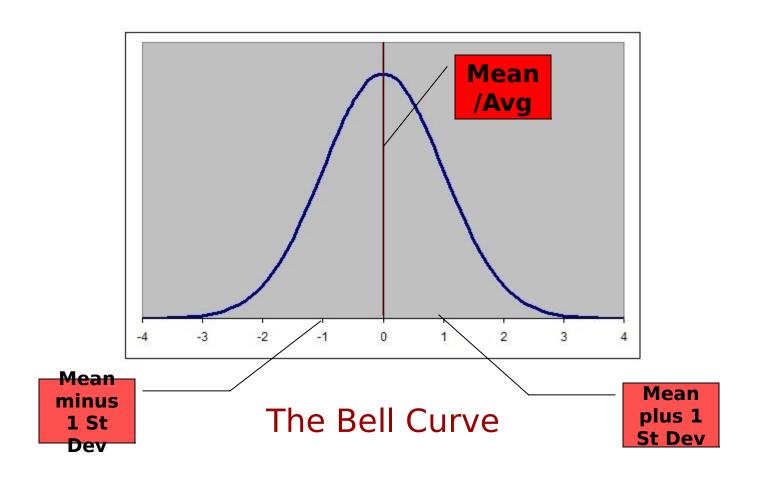
*Note:

The S2M3 Executive Summary has been standardized to reflect uniform positive/negative Z-score values across all metrics, thus positive Z-scores indicate more desirable values and negative Z-scores are less desirable values. For example, in the Pharmacy Dispensing Cost metric a negative Z-score denotes a dispensing cost that falls below the peer group average. Since in that case a negative Z-score is more desirable than a positive value, the Z-score sign reflected in the S2M3 Executive Summary has been changed to positive. The Z-score signs have been reversed for the following metrics in this Executive Summary:

- Rx Dispensing Costs
- Available FTE per Daily Occupied Day
- Ratio of Support Personnel to Provider FTEs
- Inpatient Costs per RWP
- Ambulatory Costs per APG











FY06/FY07 Cost of Pharmacy Dispensing: Medical Centers

FY06/FY07 Cost of Pharmacy Dispensing Summary Statistics

Parent DMIS ID	DMIS ID Name	Raw Work	Rx \$ Less apply Cost	p Cost per Script	Z Score		Statistic	Raw Work	Rx \$ Less Supply Cost	Dis	pensing Cost per Script
0108	WILLIAM BEAUMONT AMC-FT. BLISS	11,351,313	\$ 2,547,708	\$ 0.22	-1.77	Better	Mean:	1,547,048	\$ 5,800,359	\$	7.88
0089	WOMACK AMC-FT. BRAGG	978,731	\$ 4,127,486	\$ 4.22	-0.85	+	Median:	835,243	\$ 5,359,234	\$	7.78
0095	74th MED GRP-WRIGHT-PATTERSON	1,008,792	\$ 4,608,433	\$ 4.57	-0.76		St. Dev:	2,836,267	\$ 2,139,450	\$	4.34
0067	NNMC BETHESDA	544,046	\$ 2,620,678	\$ 4.82	-0.71						
0124	NMC PORTSMOUTH	1,379,162	\$ 9,018,997	\$ 6.54	-0.31			Value nearest	peer group mea	an	
0052	TRIPLER AMC-FT SHAFTER	691,116	\$ 4,861,871	\$ 7.03	-0.20						the peer group me
0109	BROOKE AMC-FT. SAM HOUSTON	792,613	\$ 6,133,324	\$ 7.74	-0.03			2 Std. Deviation	ons above/belov	v the i	peer group mean
0047	EISENHOWER AMC-FT. GORDON	681,389	\$ 5,332,586	\$ 7.83	-0.01			3 Std. Deviation	ons above/belov	v the i	peer group mean
0029	NMC SAN DIEGO	1,133,409	\$ 9,413,716	\$ 8.31	0.10						
0125	MADIGAN AMC-FT. LEWIS	889,071	\$ 7,405,689	\$ 8.33	0.10						
0117	59th MED WING-LACKLAND	877,873	\$ 7,830,476	\$ 8.92	0.24						
0037	WALTER REED AMC-WASHINGTON DC	602,172	\$ 5,385,882	\$ 8.94	0.24						
0014	60th MED GRP-TRAVIS	448,568	\$ 7,193,557	\$ 16.04	1.88	↓					
0073	81st MED GRP-KEESLER	280,418	\$ 4,724,624	\$ 16.85	2.07	Worse					

Mean Disp Cost per Script	St Dev	1 St Dev Range	2 St Dev Range	3 St Dev Range
\$7.88	\$4.34	(\$3.54 - \$12.22)	(-\$0.80 - \$16.56)	(-\$5.14 - \$20.90)





FY06/FY07 William Beaumont AMC Pharmacy Workload

Fiscal Year	Parent DMIS ID	Fiscal Month	Raw Statistical Amount	Weighted Statistical Amount
2006	0108	01	42,065.00	42,690.85
2006	0108	02	43,101.00	43,180.10
2006	0108	03	44,742.00	44,917.20
2006	0108	04	48,233.00	48,871.85
2006	0108	05	44,495.00	45,965.80
2006	0108	06	49,709.00	50,012.80
2006	0108	07	44,147.00	42,810.20
2006	0108	08	43,391.00	43,829.45
2006	0108	09	40,544.00	41,104.25
2006	0108	10	10,877,772.00	45,866.40
2006	0108	11	42,111.00	42,580.00
2006	0108	12	42,235.00	42,448.80

Fiscal Year	Parent DMIS ID	Fiscal Month	Raw Statistical Amount	Weighted Statistical Amount
2007	0108	01	42,816.00	43,829.95
2007	0108	02	39,735.00	40,217.15
2007	0108	03	39,658.00	39,922.35
2007	0108	04	44,639.00	45,089.60
2007	0108	05	43,926.00	44,403.05
2007	0108	06	50,339.40	51,054.35
2007	0108	07	45,022.00	46,101.40
2007	0108	08	44,213.00	44,341.80
2007	0108	09	39,831.00	109,232.00
2007	0108	10	38,569.00	38,439.40
2007	0108	11	42,210.00	42,489.80
2007	0108	12	39,768.00	40,026.35





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2006	0108	03	44,742.00	44,917.20
2006	0108	04	48,233.00	48,871.85
2006	0108	05	44,495.00	45,965.80
2006	0108	06	49,709.00	50,012.80
2006	0108	07	42,424.00	43,001.20
2006	0108	80	43,391.00	43,829.45
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2007	0108	04	44,639.00	45,089.60
2007	0108	05	43,926.00	44,403.05
2007	0108	06	50,339.40	51,054.35
2007	0108	07	45,022.00	46,101.40
2007	0108	80	44,213.00	44,341.80
2007	0108	09	39,831.00	109,232.00
2007	0108	10	38,569.00	38,439.40
2007	0108	11	42,210.00	42,489.80
2007	0108	12	39,768.00	40,026.35

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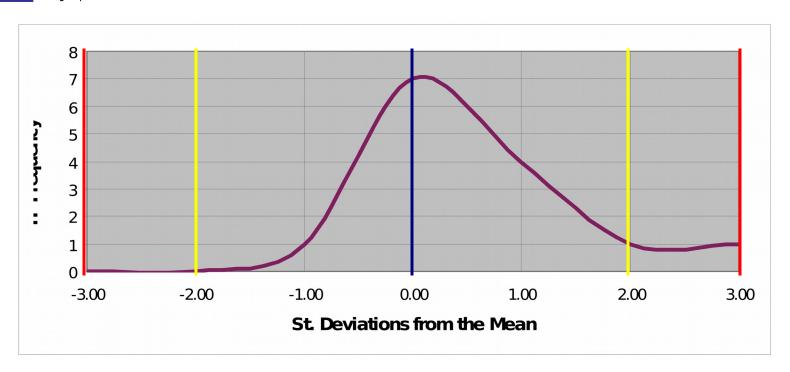




FY06/FY07 Cost of Pharmacy Dispensing: Medical Centers

Peer Group Graphs

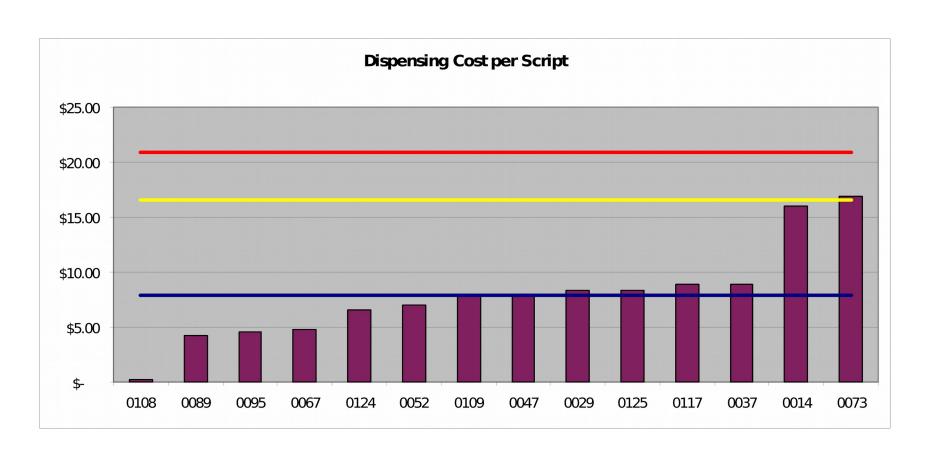
Lines Represent +/- 3 Standard Deviations from the peer group mean
Lines Represent +/- 2 Standard Deviations from the peer group mean
Peer group mean



Graph 1



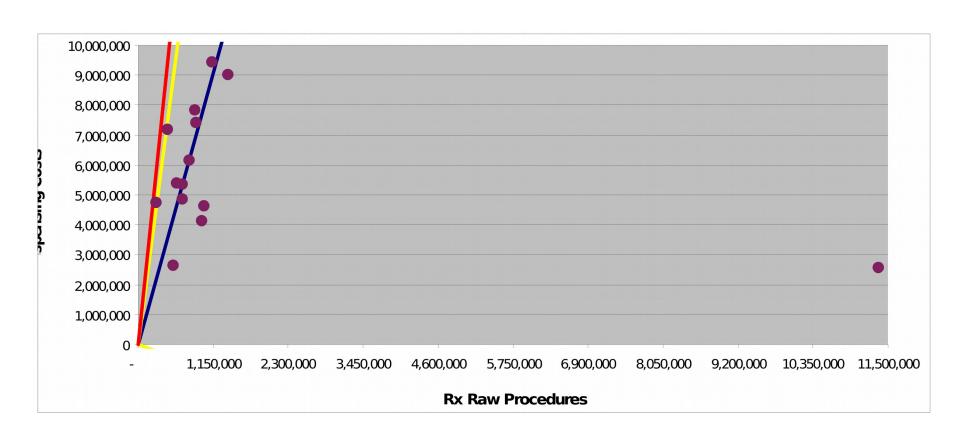




Graph 2







Graph 3





You can now:

- Describe the origin and goals of Six Sigma
- Identify how Six Sigma is used in healthcare and other industries
- Understand and correctly interpret the S2M3 tool
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Six Sigma MEPRS Management Metrics (S2M3)

Questions?